



State of California

Franchise Tax Board

CalFile 

Why Should I Use CalFile?

- It's free, fast, and secure.
- CalFile is available 24 hours a day, seven days a week.
- You can receive your refund usually in less than one week.
- You can file now and pay later.
- You receive instant confirmation that we received your return.
- CalFile is also available in Spanish.

What's New This Year?

- You are now able to claim up to 10 dependents.
- CalFile now checks taxpayers for eligibility for ReadyReturn and offers them the option to switch to ReadyReturn if their return is ready.
- Payment and refund details are provided on the confirmation page.

You May Qualify to Use CalFile If You:



- Are filing an original 2008 personal income tax return.
- Were a California resident for the entire year.
- Claim standard or itemized deductions.
- Claim up to 10 dependents.
- File forms 540, 540A, or 540 2EZ.
- Claim child and dependent care expenses.
- Received unemployment compensation.
- Claim renter's credit.
- Receive a refund, have no amount due, or owe (file now, pay later option is available).
- Check out the complete list of [qualifications](#).

Mary L. Taxpayer – Head of Household Filer




- Single parent, one child (Susie – age four)
- Works full-time as an administrative assistant
- Annual income: \$45,000
- 37 years old

Mary Enters Her Social Security Number and Last Name



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Login

Language Preference English Change

Taxpayer Identification Information

Social Security Number * (Numbers Only)


Last Name * (Letters Only - Max 17 Characters)

Where do I enter my spouse/RDP and filing status information? 

Professional Tax Preparer


Are you a paid tax preparer, completing this return on behalf of the taxpayer listed above?

☐ Yes ☒ No

If yes, enter your EFIN. 

Continue

Mary Chooses Her Filing Status



CalFile Filing Status

IMPORTANT! Do **NOT** use your browser's back button.
Use the "Back" button at the bottom of each page.

Taxpayer	Social Security Number ***** 1333	Last Name Taxpayer
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Select a filing status for your California return. *

☐ Single ?

☐ Married/RDP Filing Separately ?

☐ Qualifying Widow(er) ?

☐ Married/RDP Filing Jointly ?



☒ Head of Household ?

Continue

Back

[Log Out](#)

Mary Enters Her Head of Household Information



CalFile Head of Household Information

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About Your Qualifying Person

Social Security Number ?

55555555

Name

Susie Taxpayer *

Age as of 12/31/2008 *

4

Years

If less than 1 year old:

Month

Relationship ?

Child or Stepchild *

If "Other", please explain:

75 characters max

Was your qualifying person's gross income less than \$3,500 in 2008? *

?

☒ Yes ☐ No

Did you provide more than half the support for your qualifying person in 2008? *

?

☒ Yes ☐ No

Was your qualifying person a full-time student for at least 5 months in 2008? *

?

☒ Yes ☐ No

Did your qualifying person live with you for the entire year in 2008? *

☐ Yes ☒ No

As of December 31, 2008, was your qualifying person married or in a registered domestic partnership (RDP)? *



☐ Yes ☒ No

Was your qualifying person a citizen of the U.S. or resident of the U.S., Canada, or Mexico? *

?






☒ Yes ☐ No

Mary Answers Six Simple Questions to Build Her Tax Return





CalFile Build Your Return

IMPORTANT! Do **NOT** use your browser's back button.
Use the "Back" button at the bottom of each page.

1. In 2008, did you have **any** of the following types of income? * ☒ Yes ☐ No
 - California wages, salaries, tips (Form W-2)
 - Unemployment compensation (Form 1099-G)
 - Taxable interest (Form 1099-INT)
 - Taxable scholarship and fellowship grants (Form W-2)
2. Did you have **other types** of income or **income adjustments** on your federal tax return? *  ☐ Yes ☒ No
3. Did you make any of the following types of **state tax payments** for 2008? *  ☐ Yes ☒ No
 - Withholding on a form **other** than Form W-2
 - Estimated tax payments
 - Excess SDI withheld
4. For at least half of 2008, did you pay rent on your primary residence in California? *  ☐ Yes ☒ No
5. Did you pay someone to care for your child or other qualifying person so you could work or look for work in 2008? *  ☒ Yes ☐ No
6. Do you want to itemize your deductions? *  ☐ Yes ☒ No

[Log Out](#)

Mary Completes Her Name and Address Information



State of California
Franchise Tax Board

CalFile Name & Address

► Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	Return Summary	View, Sign & Submit Return
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IMPORTANT! Do **NOT** use your browser's back button. Use the "Back" button at the bottom of each page.

Your Information

Social Security Number *****1333

First Name *

Middle Initial

Last Name *

Suffix

If you filed your 2007 tax return using a different last name, enter that name below. ?

Previous Last Name

Previous Suffix

Your Exemptions

I am blind. ? ☐

I am 65 years old or older. ? ☐

My parent (or someone else) can claim me as a dependent on his or her tax return. ? ☐

Address

Street Address *

Apartment Number



PMB Number ?

City *

State *

ZIP Code *

Mary's Dependent Is Her Daughter Susie



CalFile Dependents

► Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	Return Summary	View, Sign & Submit Return
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IMPORTANT! Do **NOT** use your browser's back button. Use the "Back" button at the bottom of each page.



Enter name and relationship. Do not include yourself or your spouse/registered domestic partner (RDP). ?

Name	Relationship
<input type="text" value="Susie Taxpayer"/>	* <input type="text" value="Child"/> *

Do you need to add or remove a dependent? Total number of dependents:

[Log Out](#)

Mary Enters Her W-2 Information



CalFile Income

Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	Return Summary	View, Sign & Submit Return
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IMPORTANT! Do **NOT** use your browser's back button. Use the "Back" button at the bottom of each page.

Note: Round all amounts to whole dollars.

Federal Adjusted Gross Income



Form 1040, line 37
Form 1040A, line 21 \$ * ?
Form 1040EZ, line 4


Form W-2

1. Employee's SSN (box a)	?	Employer's Federal ID (box b)	?	Employer's Name (box c)	?
<input type="text" value="91919191"/> *		<input type="text" value="400001333"/> *		<input type="text" value="Acme Incorporated"/> *	
Social Security Wages (box 3)	?	California SDI or VPD	?	Employer's State ID (box 15)	?
\$ <input type="text"/>		\$ <input type="text"/>		<input type="text" value="9988774455"/>	
				State Wages (box 16)	?
				\$ <input type="text" value="4500"/> *	
				California State Tax (box 17)	?
				\$ <input type="text" value="4500"/>	

Do you need to add or remove a Form W-2? Total Forms W-2:

Mary Claims Child Care Expenses Credit



 **Child & Dependent Care Expenses Credit**

Name & Address	Income	Income Adjustments	Deductions	► Payments & Credits	Tax	Refund or Payment	Return Summary	View, Sign & Submit Return
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Child & Dependent Care Expenses Credit - Step 1 of 5: General Information

You may be able to reduce the amount of tax you owe by claiming a credit for child and dependent care expenses you paid while you and your spouse/registered domestic partner(RDP) worked or looked for work in 2008. Please review the [qualifications](#) before you continue.

How many qualifying persons do you have?*

How many care providers did you pay to care for your qualifying persons?*

Was the care provided in California?*

Did you receive earned income (wages, salary, etc.) in 2008?*

Did you receive any unearned income (child support, inheritance, etc.) in 2008 that you used to support your household?*

Did you receive dependent care benefits from an employer?*

If you do not want to take this credit, click to go to the next part of your return.

Mary Receives Child Care Credit of \$258

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CalFile Child & Dependent Care Expenses Credit

Name & Address	Income	Income Adjustments	Deductions	► Payments & Credits	Tax	Refund or Payment	Return Summary	View, Sign & Submit Return
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IMPORTANT! Do NOT use your browser's back button. Use the "Back" button at the bottom of each page.

Child & Dependent Care Expenses Credit - Step 5 of 5: Credit Amount

Based on the information you provided, your credit amount is **\$258**. We will subtract this amount from your total tax.



Did you receive any dependent care benefits from an employer? ☒ Yes ☐ No

Did you receive any unearned income that you used to support your household? ☐ Yes ☒ No

Did you receive dependent care benefits from an employer? ☐ Yes ☒ No

If you do not want to take this credit, click to go to the next part of your return.

Mary Can Direct Deposit Her Refund Into One or Two Accounts

**State of California
Franchise Tax Board**

CalFile Refund or Payment


Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	►Refund or Payment	Return Summary	View, Sign & Submit Return
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IMPORTANT! Do NOT use your browser's back button.
Use the "Back" button at the bottom of each page.

You have chosen to have your **refund** of **\$4,410** deposited into two accounts. Please provide the following information.



Bank Account Information

Account #1

Amount to Deposit *  \$ **Note:** Round all amounts to whole dollars.


Routing Number *  Account Number * 



Please re-enter your Routing and Account Numbers

Routing Number *  Account Number * 



Account Type * Checking ☒ Savings ☐

Account #2

Amount to Deposit  We will deposit the rest of your refund into this account.



Routing Number *  Account Number * 


Please re-enter your Routing and Account Numbers

Routing Number *  Account Number * 

Account Type * Checking ☒ Savings ☐



Mary Reviews Her Entries Before Submitting Her Return



Return Summary

Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	►Return Summary	View, Sign & Submit Return
IMPORTANT! Do NOT use your browser's back button. Use the "Back" button at the bottom of each page.								
Please review this summary of your 2008 California Resident Income Tax Return before you e-file it. You may want to print this page for your reference. Your return has not yet been filed.								
Name & Address	Mary L Taxpayer 123 Main St Anytown, CA 96199							
Social Security Number	*****1333							
Filing Status	Head of Household							
Number of Dependents	1							
Federal Adjusted Gross Income	\$45,000							
California Income Adjustments - Subtractions	\$0							
California Income Adjustments - Additions	\$0							
Deduction Type	Standard							
Deduction Amount					?	\$7,384		
Taxable Income					?	\$37,616		
Tax						\$681		
Total Exemptions					?	\$408		

Mary Is Ready to View Her Return



State of California
Franchise Tax Board



View, Sign & Submit Return

Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	Return Summary	►View, Sign & Submit Return
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IMPORTANT! Do **NOT** use your browser's back button. Use the "Back" button at the bottom of each page.

Step 1 of 3: View and Print Your Return

You must view and print your return before you submit it. Click the "View Return" button to view a copy of your final return in PDF format. Once you review your return, print a copy for your records, and then close the window.

View Return

Click the "Back" button below if you need to change any information.

Please check the box:

☐ * I have printed a copy of my return for my records.

Step 2 of 3: Sign Form FTB 8453-OL and Read the Consent Language

To e-file your return, you must:

- **Sign** Form FTB 8453-OL (printed with your return) and retain for your records. **Note:** Do not mail Form 8453-OL to FTB
- **Read** the Consent to Disclosure.

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CalFile

 View, Sign & Submit Return

Name & Address	Income	Income Adjustments	Deductions	Payments & Credits	Tax	Refund or Payment	Return Summary	►View, Sign & Submit Return

IMPORTANT! Do NOT use your browser's back button.
Use the "Back" button at the bottom of each page.

Print the Return

Forms - DO NOT MAIL TO FTB

2008 FORM **540 C1 Side 1**

Your SSN or ITIN 400-00-1333		P
Spouse's/RDP's SSN or ITIN		AC
Apt. no./Sta. no.	PBA Code	A
State CA	ZIP Code 96199	R
		RP

Name only from the 2007 tax return.
Spouse/RDP _____

Child (with qualifying person). (see page 3) _____
 (er) with dependent child. Enter year spouse/RDP died _____.
 ove and full name here _____
 fill in the circle here. ● ○

the circle here (see page 9) ● 6 ○

Box by the pre-printed dollar amount for that line. Whole dollars only
 in 2 or 5, enter 2, in the box.

..... 7 ☒ X \$99 = \$ 99
 are visually impaired, enter 2 8 ☐ X \$99 = \$ _____

• Read the Consent to Disclosure.

View Return

submit it. Click the "View Return" button to view a copy of your final
print a copy for your records, and then close the window.



below if you need to change any information.


records.

the Consent Language

(return) and retain for your records. **Note:** Do not mail Form 8453-OL to

Mary Submits Her Return

State of California
Franchise Tax Board

View, Sign & Submit Return


Name & Address	Income	Tax	Refund or Payment	Return Summary	► View, Sign & Submit Return
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IMPORTANT! Do **NOT** use your browser's back button.
Use the "Back" button at the bottom of each page.

Step 3 of 3: Submit Your Return



When you are ready to e-file your return, click the "Submit" button below.


Caution: Once you click the "Submit" button, you will not be able to come back to CalFile to get a copy of your return or make changes. **Please make sure your return is correct and that you have a copy for your records.**



[Log Out](#)

Mary Receives Instant Confirmation Her Return Was Accepted



 Confirmation

Return Received

We received your 2008 California Resident Income Tax Return for processing on **01/09/2009**.

Your Declaration Control Number (DCN) is:
11001522623609

This number is your confirmation that you have successfully e-filed your return.
Please print a copy of this page for your records.

Refund Information

Account #1

Account Type: Checking	Date request made: 01/09/2009
Account Number Ending: 4433	Deposit of Refund Amount: \$2,410

Account #2

Account Type: Checking	Date request made: 01/09/2009
Account Number Ending: 8877	Deposit of Refund Amount: \$2,075